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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Banyai, Cindy, Lyn, ,					1		
	(b) Address (number and street) PO Box 2923	) Address (number and street)  PO Box 2923  **C Check if address changed				Candidate's FEC Identification Number     H0FL19106		
	(c) City, State, and ZIP Code						nded	
	Fort Myers		Fl	_ 3390	1	Statement (N) OR (A)		
4.	Party Affiliation	5. Office Sou	ght		6. State & Dist	trict of Candidate		
	DEMOCRATIC PARTY	House	!		FL	19		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(a) Name of Committee (in full) FRIENDS OF CINDY BANYAI								
	(b) Address (number and street) 1415 DEAN STREET							
	(c) City, State, and ZIP Code							
	FORT MYERS				FL	33901		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my								
candidacy.								
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
	(b) Address (number and street)							
(c) City, State, and ZIP Code								
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.								
	gnature of Candidate					Date	•	
В	anyai, Cindy, Lyn, ,			[Elec	tronically Filed]	01/19/2021		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								
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FEC FORM 2 (REV. 02/2009)